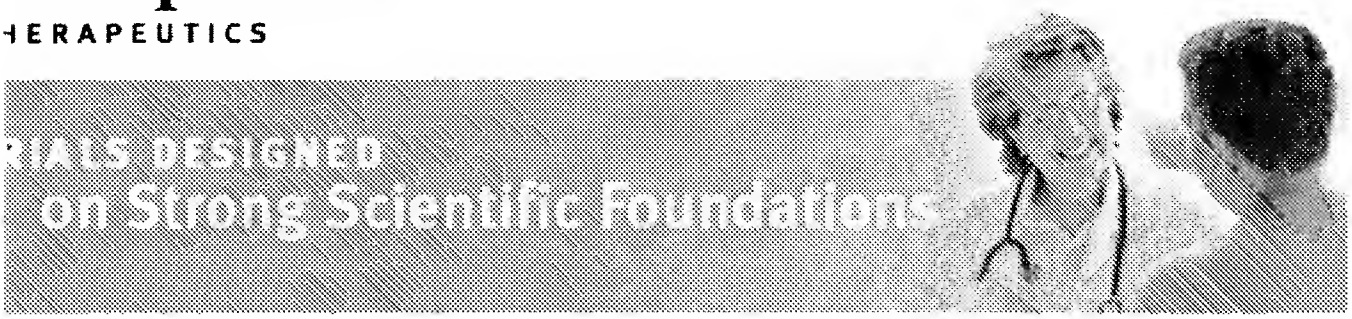
EXHIBIT 2

Contact Site Map Search

Prospect THERAPEUTICS



ronic Lymphocytic Leukemia
ıltiple Myeloma
'fuse Large B-Cell Lymphoma

ıltiple mechanisms of action make 'S-100 an ideal and unique ıdidate for the treatment of cancer.

Chronic Lymphocytic Leukemia (CLL)

CLL, a blood-borne cancer, is the most common form of adult leukemia in the United States. CLL is characterized by proliferation of malignant white blood cell referred to as lymphocytes, in the bone marrow, lymph nodes and spleen, which leads to an increase in white blood cell counts, as well as enlarged lymph nodes and spleens in most patients. The disease is progressive and often fatal with a five year survival rate of 75%. According to The Leukemia & Lymphoma Society, approximately 95,000 patients have CLL in the United States, and there will be approximately 15,300 new cases of CLL diagnosed in the United States in 2007.

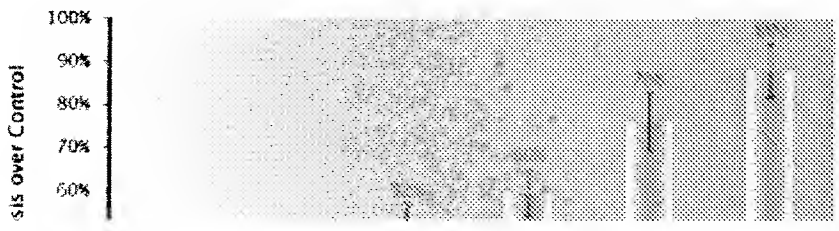
Existing Treatments for CLL

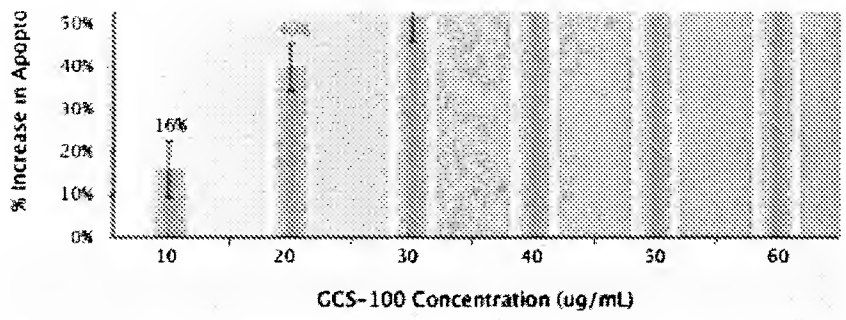
CLL is an incurable disease. It is a slowly-progressing disease where the median survival from diagnosis can be eight to ten years. The disease tends to progress slowly and eventually reaches a point where treatment is required. Once treatment is required, median time to relapse is approximately four years. Subsequent relapses occur over a shorter time frame and result in death due either to infection or failure of bone marrow. CLL is treated by chemotherapy, radiation therapy, biological therapy, or bone marrow transplantation. Symptom: are sometimes treated surgically or by radiation therapy.

GCS-100 for Treatment of CLL

The primary rationale for evaluating GCS-100 for use in the treatment of CLL is based on data obtained by Professor Finbarr Cotter of St. Barts Hospital and the London School of Medicine. These studies were performed in cells collected from patients with CLL. CLL cells have high concentrations of galectin-3 compared to non-cancer cells, and galectin-3 produces resistance to apoptosis. As shown in the figure below, increasing concentrations of GCS-100 produced increasing amounts of apoptosis of CLL cells extracted from nine patients.

Increasing Apoptosis of CLL Cells using GCS-100





Increasing amounts of apoptosis of CLL cells collected from nine patients as measured by flow cytometry after staining with MC540/7AAD. Of the nine patients, six had progressed on prior chemotherapy.

Source: Presentation by Cotter F. et. al. 9th International Conference on Malignent Lymphoma Jan. 2005: Lugano, Switzerland.Published: Cotter F. et. al. GCS-100, A Selective Galectin-3 Mediated CL Therapy Induces Angiogenic AKT1 Inhibition with Caspase-9 Activation. *Annals of Oncology*, Vol. 16, 2005 Suppl. 5

Clinical Development Program

Our phase 2 clinical trial is designed to evaluate the effects of the administratior of an intravenous formulation of GCS-100 on various markers of apoptosis and peripheral leukocyte count in up to 24 patients with CLL. The safety of treatmen with GCS-100 also will be evaluated. The study is being conducted at six cancer research centers within the United States and was opened for enrollment in June 2007.